## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48					
NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼  C C00618876					
Check if 24-hour report						
Full Name of Payee MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address 915 KING STREET						
2ND FLOOR	Amount					
City State Zip Code	1746350.00					
ALEXANDRIA VA 22314	Transaction ID: SE24.212 Date of Disbursement or Obligation					
Purpose of Expenditure MEDIA  Category/ Type  004	08 12 2016					
Name of Federal Candidate Support Offi	ice Sought: House District:					
HILLARY RODHAM CLINTON Oppose	President Senate State:					
Calendar Year-To-Date Per Election for Office Sought  Dis 201	bursement For:  Primary					
Full Name of Payee MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address 915 KING STREET	Amount					
2ND FLOOR						
City State Zip Code  ALEXANDRIA VA 22314	1746350.00 Transaction ID : SE24.213					
	Date of Disbursement or Obligation					
Purpose of Expenditure MEDIA  Category/ Type  004	08 / 12 / 2016					
	ice Sought: House District:					
HILLARY RODHAM CLINTON Oppose	President Senate State:					
Calendar Year-To-Date Per Election for Office Sought  Dis 20	bursement For: Primary ☐ General  Other (specify) ►					
(a) SUBTOTAL of Itemized Independent Expenditures	3492700.00					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Ryan R. Call Esq. [Electronically Filed] Date	08 / 17 / 2016					

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	OIII OI INDEF	LINDENT EXTEND	ITOTILO		PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTE	E (In Full)				FEC IDENTIFICATION NUMBER ▼
Rebuilding Ame	erica Now				C C00618876
Check if 24-hour r	eport X 48-hour r	eport New rep	ort Amends repo	ort filed on	M / D D / Y Y Y Y Y
Full Name of Payer MULTI MED	IA SERVICES (	CORPORATION			of Public Distribution/Dissemination
Mailing Address 9	15 KING STREET			Amou	08 18 2016 nt
	ND FLOOR				
City ALEXANDRIA		State VA	Zip Code 22314		123920.00 action ID : SE24.214 of Disbursement or Obligation
Purpose of Expend MEDIA	liture		Category/ Type 004	М	08   12   Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal C	andidate		Support	Office Sough	t: House District:
DONALD J. TRUM	Р		Oppose	X Preside	
	diction four to bate			Disbursement 2016 O	t For: Primary X General
Full Name of Payer	e				of Public Distribution/Dissemination
Mailing Address				Amou	nt
City		State	Zip Code		
Purpose of Expend	liture		Category/ Type	Date of	of Disbursement or Obligation
Name of Federal C	Candidate		Support Oppose	Office Sough	
Calendar Year Per Election fo	-To-Date or Office Sought			Disbursemen	
(a) SUBTOTAL of It	emized Independent E	Expenditures			123920.00
(b) SUBTOTAL of U	Initemized Independer	t Expenditures		·· •	
(c) TOTAL Independ	dent Expenditures			· •	3616620.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Ryan R. Signature	Call Esq.	[Electron	ically Filed] Date	e 08	17 / 2016